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Some ten years later the house doctor had occasion to send for Miss Watson to attend a patient of his who needed special care. He complimented her on her healthy, bright appearance when he saw her. "I may rightly be well, doctor," she said, "for I have been lazy all summer up in British Columbia visiting an old patient of yours."

"Ah," said the doctor, mildly interested, "who was that?"

"Morris."

"What," shouted the doctor, "tell me all about it."

"Why the day you threatened to shave his head the little woman got desperate and went off and hunted up the man he was supposed to have killed and who, she knew, was hiding from pure malice. She persuaded him that John was dying and that it was he would have to swing, not John."

The man was thoroughly frightened and readily agreed to have a boat ready to convey them out of the city, in case the thing could be done. The signal was agreed upon and at the sound of a whistle Morris sprang from his bed and made off like a streak of white lightning."

"But the fellow was so weak."

"In your mind he was."

"But the temperature?"

"He told me that in the dark there were other ways of warming up a thermometer. I presume by a little friction of the bulb on a blanket."

"Put me down an idiot."

"We were good idiots, I think," said the nurse. "I believe the little woman's prayers blinded us supernaturally. At any rate he is now the prince of farmers and has his quiver full."

UNFREQUENTED PATHS

BY ELSIE BOWDEN, R.N.

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PERHAPS hospitals for contagious disease attract the least attention or interest of any hospital institution, except from those individuals who have had occasion to benefit by the care and advantages they provide.

It is only of comparatively recent years that hospitals for diseases of this nature have been taken vigorously in hand, and the attempt made to raise them to the standard of other special hospitals, so that the very words "contagious hospital" is to the majority of people sufficient to conjure up visions of a gruesome or loathsome character, in which direst conditions,—bad sanitation, incompetent medical attention, unskilled

nursing etc.,—prevail, all within a general atmosphere of appalling slipshod disorder and pure indigo. But we have changed all that. Certainly no one possessed of these ideas would, in sailing down the East River, dream of associating North Brother Island in the remotest way with contagion, yet the numerous red or red and white brick buildings scattered over the island in their setting of trim lawns and background of maple trees constitute the Riverside Hospital, the chief of three contagious hospitals under the management of the New York City Department of Health.

Ferries run hourly from New York, and on three week-days and Sundays the patients may receive visitors.

On these days a stranger may be puzzled by the number of people hurrying in all directions, garbed in what appear to be voluminous night-gowns which completely envelop the wearer. He wonders vaguely if Hallowe'en has taken him unaware. Matters become clearer when he is issued into the visitors' room proximate to the wharf. In this room the walls are lined with narrow closets, each provided with a key. In them the visitors deposit hats and jackets and don the gowns they find hanging there, locking the door and taking the key with them, so no one's things are lost or taken by mistake.

The average number of patients is three hundred. Of these one hundred are tuberculous, and for the amelioration or the comfort of these, apparently every device scientific and philanthropic is provided. The six large pavilions on the southeast side of the island are devoted to this department. They are of weather-board structure; some are separated into several rooms; all are large and airy and scrupulously clean. It is pleasant to record that four of these wards are relegated to those whose recovery is possible; one is especially equipped for advanced cases, one for those in the medium stage.

Of the first and largest division, one's impressions are all of good cheer and thankfulness. For, aided by human care and kindness, the fresh air and sunshine and good food are achieving their incomparable results. Except in very rainy weather the patients live out of doors or in the cheerful glass sun houses in which are comfortable chairs dressed in cozy red covers. They seem a sociable community and overhearing scraps of conversation one learns that the two most absorbing topics relate to the amount of milk and the number of eggs consumed between meals, and the increase of weight; for each one is weighed once a week, and the supreme satisfaction with which an increase is announced, could not be excelled were some laudable feat of personal valor being related. Those of literary bent avail themselves of the well-stocked library, an alluring little building of red bricks covered with Virginia creeper, while

the industrious employ themselves with bead-work or wood carving taught them by a benevolent lady visitor.

In the acute ward, the long rows of beds are curtained off from the central aisle and each bed is separated from every other by a ground-glass partition, seven feet high, thus making what is practically a private room for each patient. Of these most pitiful of all sufferers, there is little to say. Every possible thing is done, the closest attention given. In the presence of the world-old mystery of pain most of us can only think vaguely of the Larger Hope, and be silent.

The department for measles is a large substantial building accommodating one hundred and twenty patients. Here the same perfection or order prevails. Large airy wards, immaculate cribs, immaculate beds, immaculate everything. Opening off the wards are sun parlors, where the convalescent children play. The children are happy and rosy children, consequently *not* immaculate.

Noticing one, a dark-eyed mite, we learn from the supervisor that he is one of a family of six from the East Side Hebrew quarter, where they were discovered with their mother in a practically starving condition, the father in jail for shooting his brother. The mother's reason was impaired through worry and lack of food. She was taken to Bellevue. All the children, the youngest only a few months old, had measles (fortunately, one privately thinks) and were brought to Riverside, where they had the time of their lives.

This happened in December, and so the mites had their share in the Merry Christmas, and heard for the first time of dear Old Santa Claus. "He don't never come down our street," said the eldest boy. "Perhaps there are no good boys on your street." "What d'ye mean by good boys?" asked the lad, and indeed the supervisor said, "It is easy to believe he didn't know, for a more unmanageable creature didn't exist." The lad had never been taught the difference between right and wrong. It was explained that when the nurse said, "Do this," and they did it, or said, "Don't do that," and they did not, Santa Claus would come. He came,—after half the night had been spent in breathless watching; till sleep overcame weary little eyes. He came,—the first Santa Claus. Imagine the joy of it, and the pathos. Perhaps, indeed certainly, these poor little waifs (and many others for this is but an instance) have never partaken so largely of the good things in this world, never been so warmly clad, never so carefully cared for, never so greatly loved; for it is genuine love with which these nurses (who appear to be especially created for this work, so unselfishly do they perform it) gather these homeless waifs to them, and mother them.

The wards for scarlet fever and diphtheria are on the pavilion plan similar to those of tuberculosis patients. In all cases whenever practicable the patients are kept out of doors. The very sick ones are carried out when possible, cribs and all. And what a beautiful out of doors it is! With the beautiful lawns, the many winding walks margined with elm or maple trees, and everywhere, flowers. And how fascinating to watch all those white boats; those busy tugs; those gay yachts; those big boats, that often produce music as they pass; and to listen to all the different kinds of whistles so dear to childish hearts!

The great majority of patients are children, and the great majority of children are now English speaking. Very young children are accompanied by their mothers. Amusing incidents often occur through the confusion of tongues. A Slavonic woman kept pointing to her baby and asking "marote, marote." A German woman professing to understand, explained that marote meant, "getting better." The nurse, anxious to satisfy the mother, approached her and announced, smilingly, "Sein kind ist marote, Frau, marote," whereupon the mother broke into piteous wails. "Marote, Frau marote," gaily reiterated the nurse, believing she was emphasizing the child's improvement, but the wailing only increased. Afterward she learned that marote meant dying.

An Italian man, on admission, was taken into the bathrooms for the customary bath. The bath was drawn, clean pajamas provided, and he was left to take his bath. In a short time he appeared arrayed in pajamas, but with no sign of recent ablutions. On investigation, all his garments including his hat were found in the bath-tub. Plainly, in his estimation, the only reason for tubs of water was the washing of clothes.

The two charming cottages of red and white brick deserve special mention. They each consist of three tiny wards, each with bath, diet kitchen and pantry. The walls are soft green, door and window frames glistening white enamel. The floors are gray tiles, the skirting white marble. These dainty cottages are for special or isolated cases. The nurses love them. "It is just like keeping house," says the nurse in charge of one of them, where she has an interesting little community of five chubby sun-kissed children known as the "chronics." This is explained to mean chronic tube cases; and Dr. Dwyer who instituted the practice of intubation could ask for no finer example of the success of his method, for without the knowledge of it all these little lives had been forfeited.

Eugene, aged three years, came to Riverside at the mature age of one year. For two years he has "lightly drawn his breath" per tube. A few weeks ago a tracheotomy, in the hope that, if successful, he might be able to dispense with his tube entirely, was performed.

(Since writing this paper, I am informed that Eugene has been without his tube for a week and breathes without difficulty, so the practice of tracheotomy in chronic tube cases is proven successful, and an epoch marked in affairs intubationary. The other children are to undergo similar treatment immediately.)

There is a large steam laundry equipped with the latest labor-saving machinery. There is a chapel, one-half for the Roman Catholic service, and the other half for the Protestant. There is a trim tennis court.

The doctor's home near the centre of the island is a comfortable looking house, and in the nurse's home beside it the "home atmosphere" is truly present. The nurses themselves are excellent exponents of island life. The tired, dragged-out appearance so familiar to us among most hospital nurses is entirely lacking, and everyone seems in good health and light spirits, and all unite in loyalty to and interest for the island. Here there is nothing of the petty tyranny we hear so much about of late. Each nurse does her best, knowing that in return she will receive appreciation and consideration; because the highest standard in nursing and personal character is required. The nurses say, "It is hard to come and it is just as hard to go," and certainly the wheels of life run smoothly on the island, the oil apparently being the mutual respect and bonhomie between superior and subordinate, a condition of affairs not found every day.

The other hospitals for contagious diseases are the Willard-Parker at Sixteenth Street and East River, where an average of three hundred cases are received per month, and the Kingston Avenue Hospital in Brooklyn for Brooklyn cases and the newly arrived immigrants. Three hundred cases per month is the average number received.



THE call to health has humanitarian aspects. Is it a light or small affair to postpone premature death, or to avoid sickness, and thereby postpone or avoid the pain, the sorrow and the weeping of those who would mourn? Is it not a kind of cruelty to allow infected water or milk to carry into happy homes the germs of typhoid or scarlet fever? If a thief in the night should wound and kill, as milk-borne typhoid often does in a family of children, should we not call him cruel? Sickness and death from carelessness are not, perhaps, as repugnant or as cruel as those from malice or robbery, but the actual effects upon the family and the social organism are much the same. —WILLIAM T. SEDGWICK, in *Yale Medical Journal*.